


**2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jan 28, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # M99000001463

1. Entity Name  
 JANNEY MONTGOMERY SCOTT LLC



Principal Place of Business 1801 MARKET STREET PHILADELPHIA, PA 19103	Mailing Address 1801 MARKET STREET PHILADELPHIA, PA 19103
---	---

**DO NOT WRITE IN THIS SPACE**



01212004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 23-0731260	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION, FL 33324

**DO NOT WRITE IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00**  
**Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR RUDOLPH CHARLES SANDERS 505 ORIOLE LANE VILLANOVA, PA 19085
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR NORMAN TAYLOR WILDE, JR. 306 WOOD SPRING ROAD GWYNEDD VALLEY, PA 19437
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR THORNTON, RICHARD A 214 BARNSBORO ROAD SEWELL, NJ 08080
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR DAVID JOHN CUNNINGHAM 519 ANDOVER ROAD WILMINGTON, DE 19803
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

000000016264  
 01/28/04-80048-010 50.00

**DO NOT WRITE IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Richard A. Thornton* 1/22/04 (215)665-6000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #